

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

GARY F. LEUNG, MD  
567 HAMILTON HILLS COURT  
AUBURN, AL 36830-7539



9590 9402 2170 6193 0253 01

2. Article Number (Transfer from service label)

7017 3380 0000 5793 6201

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X. *Gary Leung*

- ☐ Agent
- ☒ Addressee

B. Received by (Printed Name)

Gary Leung

C. Date of Delivery

8/17/18

D. Is delivery address different from item 1?

If YES, enter delivery address below:

- ☐ Yes
- ☒ No

248071945

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☒ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☒ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt